

H-1060 REGULAR AND SPEND-DOWN MEDICALLY NEEDED— Louisiana Behavioral Health Partnership (LBHP) 1915(i)

H-1061 ELIGIBILITY DETERMINATION PROCESS

Eligibility in the LBHP 1915(i) Medically Needy program shall be considered for only the individuals who meet the 1915(i) level of need and determined ineligible for other full Medicaid programs including Medically Needy under sections H-1020 or H-1030 because of the income of a spouse.

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-1061.1 Determine Assistance Unit

The assistance unit consists of the applicant.

H-1061.2 Establish Categorical Requirement

Verify that the applicant is:

- aged,
- blind,
- disabled, or
- LIFC.

Refer to E-0000, Category.

H-1061.3 Establish Non-Financial Eligibility

Verify eligibility for applicant with regard to the following factors:

- Assignment of Third Party Rights I-100
- Citizenship/Identity/Alienage I-300

- Enumeration I-600
- Medical Certification I-1000
- Residence I-1900

H-1061.4 Establish Need

A. Determine Composition of the Income/Resource Unit

The LBHP 1915(i) income/resource unit (MNIES) includes:

- applicant only

B. Determine Need/Countable Resources

Resources are not applicable.

C. Determine Need/Countable Income

Regular Medically Needy

- Step 1. Determine unearned income.
- Step 2. Subtract the \$20 SSI disregard per income unit, if applicable.
- Step 3. Subtract any remainder of the \$20 SSI disregard from gross earnings.
- Step 4. Subtract the earned income deduction is \$65 and one half of the remainder of the earnings.
- Step 5. Combine the remainders in Step 2 and Step 4.
- Step 6. Convert to quarterly amount and compare the total countable income to the quarterly MNIES for the applicant.

If income is equal to or less than the MNIES, the applicant is income eligible for LBHP 1915(i) Regular MNP.

If income is greater than the MNIES, the applicant is ineligible. Consider for Spend-down MNP.

Spend-down Medically Needy

If the applicant has been determined income ineligible for Regular MNP, subtract medical bills from the excess income (determined in the Regular MNP budget) in the following order. Refer to H-1011.5, Bills Allowed in the spend-down process.

Step 1. Subtract unpaid bills for services received up to 3 months prior to the month of application in chronological order.

Step 2. Subtract allowable health insurance premiums

Note:

Liability for health insurance premiums arises in the month payment is due, rather than in the month (or months) for which coverage is purchased.

Step 3. Subtract paid and unpaid bills including insurance co-payments and deductibles incurred for services received within the spend-down period, in chronological order (per diem if necessary), oldest to most recent.

Note:

If multiple services are received on the same date, services verified as not covered by Medicaid or non-payable by Medicaid (because the provider does not accept Medicaid) should be used first and then hospital bills.

On the date excess income is “spent down” (income equal to allowed medical expenses) the applicant is eligible for LBHP 1915(i) Spend-down. This date is referred to as the spend-down date. Eligibility begins the date the excess income is spent down.

H-1061.5 Eligibility Decision

Evaluate all eligibility requirements and verification received to make an eligibility decision to either reject or certify the application. This determination is not for full Medicaid coverage, nor eligibility for receiving behavioral health services. It is only for Medicaid payment of the behavioral health services.

H-1061.6 Certification Period

LBHP 1915(i) Regular MNP

The certification period, according to federal rules, cannot exceed six (6) months.

LBHP 1915(i) Spend-down

Certification begins no earlier than the spend-down date and shall not exceed three months. This certification will be automatically closed.

H-1061.7 Notice of Decision

Send the appropriate notice of decision to the applicant. The Statewide Management Organization (SMO) sends notice regarding eligibility for receiving behavioral health services.

H-1061.8 Form 110-MNP

BHSF Form 110-MNP is not needed for a LBHP 1915(i) Spend-down certification. The applicant is eligible for Medicaid payment of the behavioral health services beginning on the spend-down date.